

This form must be typed. See DoD 1000.21-R for form completion instructions.

AUTHORIZATION TO APPLY FOR A "NO-FEE" PASSPORT AND/OR REQUEST FOR VISA		1. DATE PASSPORT OR VISA REQUIRED BY APPLICANT LEAVE BLANK		2. MAJOR SERVICE COMPONENT USMC	
3. APPLICANT'S LAST NAME - FIRST NAME - MIDDLE NAME		4. APPLICANT'S DATE OF BIRTH		5. APPLICANT'S PLACE OF BIRTH	
6. SPONSOR'S LAST NAME - FIRST NAME - MIDDLE NAME (If same as Item 3, X block)		7. SPONSOR'S MILITARY RANK/CIVILIAN GRADE		8. SPONSOR'S SSN	
9.a. APPLICANT'S CURRENT HOME ADDRESS (Include ZIP Code)		b. HOME TELEPHONE NUMBER (Include area code)			
		c. OFFICE TELEPHONE NUMBER (Include area code/DSN) (401) 841-2760			
10.a. INTERIM ADDRESS WHERE APPLICANT MAY BE CONTACTED AFTER DEPARTING LOCATION INDICATED IN ITEM 9 (Include ZIP Code)		b. NAME OF PERSON WITH WHOM RESIDING			
		c. TELEPHONE (Incl. area code)		d. AGENT ID CODE (If applicable) LEAVE BLANK	
11. DESTINATION (Country or Countries)	12. SPECIAL ASSIGNMENT REQUIRING PASSPORT* (See Note) N/A	13. PASSPORT WILL BE FORWARDED TO: (Include complete mailing address, building number, room number, ZIP Code, and telephone number/DSN) TRANSPORTATION DIVISION PERSONNEL SUPPORT DETACHMENT 690 PEARY STREET NEWPORT, RI 02841-1511 (401) 841-2667 DSN 948			
14. ESTIMATED DATE OF DEPARTURE (From country in which applicant is currently residing) LEAVE BLANK	15. PROPOSED LENGTH OF STAY	16. AUTHORIZING OFFICIAL			
		a. NAME (Last, First, Middle Initial)			
17. ADDITIONAL INFORMATION (Attach continuation sheets if necessary) LEAVE BLANK		b. GRADE	c. TITLE		
		d. COMPLETE MAILING ADDRESS (Include ZIP Code) NAVAL STATION NEWPORT MARINE CORPS DETACHMENT (BLDG 144) NEWPORT, RI 02841			
		e. TELEPHONE NUMBER (Include area code/DSN) 401-841-2759/60 DSN: 948			
		f. SIGNATURE OF AUTHORIZING OFFICIAL		g. DATE	
FOR USE BY ISSUING OR RECEIVING AGENT (Suspense Control)					
18. DATE APPLIED FOR PASSPORT LEAVE BLANK		19. PLACE APPLIED FOR PASSPORT LEAVE BLANK		20. NAME OF COURT OR PASSPORT AGENT LEAVE BLANK	
21. DATE PASSPORT RECEIVED FROM DEPARTMENT OF STATE LEAVE BLANK		22. PASSPORT NUMBER LEAVE BLANK		23. DATE OF PASSPORT ISSUE LEAVE BLANK	24. PASSPORT EXPIRATION DATE LEAVE BLANK
25. DOCUMENT(S) INCLUDED WITH PASSPORT LEAVE BLANK		26. COUNTRY AND DATE VISA REQUESTED LEAVE BLANK		27. DATE PASSPORT RECEIVED WITH VISA LEAVE BLANK	28. DATE PASSPORT MAILED LEAVE BLANK
PRIVACY ACT STATEMENT					
AUTHORITY: Sections 3012, 8012, 5031, Title 10 USC; 22 CFR 51.63; EO 9397.					
PRINCIPAL PURPOSE: To provide authority for issue of "No-Fee" passport and/or request for a visa which is an endorsement stamped or written on a passport, showing that it has been examined by the proper officials of a country and granting entry into that country. The Social Security Number is required to verify and/or identify the applicant.					
ROUTINE USES: Information is used in conjunction with application for passport/visa and foreign travel. Information may be released to other DoD agencies, various activities within the Department of State, foreign embassies and consulates.					
DISCLOSURE: Voluntary; however, if applicant does not provide information, a "No-Fee" passport cannot be authorized.					
*NOTE: If assignment is to Attache; MAAG; JUSMMAT; Security Assistance Liaison Office (SALO); OSP or other Special Advisory Group, e.g., CENTO; or any particular assignment that will govern type and need for a passport, enter such information. If not, enter "Not Applicable."					